

**APPLICATION DATA SHEET****Application Information**

Application Type::	Regular
Subject Matter::	Utility
Sequence Submission::	Paper
Computer Readable Form (CRF)?::	Yes
Number of copies of CRF::	1
Title::	Diagnosis and Treatment of Vascular Disease
Attorney Docket Number::	MMI-002
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	200
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Jeanette
Middle Name::	
Family Name::	McCarthy
City of Residence::	San Diego
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	3625 Dupont Street
City of mailing address::	San Diego
State or Province of mailing address::	CA

Country of mailing address:: US  
 Postal or Zip Code of mailing address:: 92106

### **Applicant Information**

Applicant Authority Type:: Inventor  
 Primary Citizenship Country:: US  
 Status:: Full Capacity  
 Given Name:: Allen  
 Middle Name::  
 Family Name:: Abelson  
 City of Residence::  
 State or Province of Residence::  
 Country of Residence:: US  
 Street of mailing address::  
 City of mailing address::  
 State or Province of mailing address::  
 Country of mailing address:: US  
 Postal or Zip Code of mailing address::

### **Correspondence Information**

Correspondence Customer Number:: 000959

### **Representative Information**

<b>Representative Customer Number:</b>	000959
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### **Domestic Priority Information**

<b>Application:</b>	<b>Continuity Type:</b>	<b>Parent Application:</b>	<b>Parent Filing Date:</b>
This Application	Non-Provisional of	60/313,097	08/16/01
This Application	Non-Provisional of	60/327,485	10/05/01

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